

# DIRECTORY OF LICENSED WISCONSIN NURSING HOMES - BY COUNTY

## DEPARTMENT OF HEALTH AND FAMILY SERVICES

Division of Disability and Elder Services

Thursday, August 17, 2006

## KEY TO DESCRIPTIONS:

Title 18 = Title XVIII, Medicare Certification

Title 19 = Title XIX, Medicaid Certification

IMD = Institute for Mental Diseases

SNF = Skilled Nursing Facility

NF = Nursing Facility

## STATE OF WISCONSIN

Bureau of Quality Assurance

PO Box 2969

Madison, WI 53701-2969

## County: Eau Claire

PROVIDER/ADDRESS	Contact and Phones	DHFS REGION	License Number, Level and Beds	Owner, Ownership, Certification Types, Provider Number
OAKWOOD VILLA 2512 NEW PINE DR ALTOONA, WI 54720	(715) 833-0400 <b>FAX:</b> (715) 833-0546 Administrator: PETER LEER	WESTERN	Lic. 3167 SKILLED CARE 96 Beds	EXTENDICARE HOMES INC PROPRIETARY CORPORATION 525454 Title 18 SNF Title 19 NF
AUGUSTA AREA NURSING HOME 215 E BROWN ST AUGUSTA, WI 54722	(715) 286-2266 <b>FAX:</b> (715) 286-2653 Administrator: JOYCE RICHARDS	WESTERN	Lic. 2083 SKILLED CARE 61 Beds	AUGUSTA AREA HOME INC GOVERNMENTAL CITY 525535 Title 18 SNF Title 19 NF
DOVE HEALTHCARE NURSING REHABILITATION 1405 TRUAX BLVD EAU CLAIRE, WI 54703	(715) 552-1030 <b>FAX:</b> (715) 552-1033 Administrator: JAMES DEIGNAN	WESTERN	Lic. 3195 SKILLED CARE 150 Beds	COVENANT HEALTHCARE LLC LIMITED LIABILITY COMP(FOR-PROFIT) 525387 Title 18 SNF Title 19 NF
SYVERSON LUTHERAN HOME  816 PORTER AVE EAU CLAIRE, WI 54701	(715) 832-1644 <b>FAX:</b> (715) 832-5336 Administrator: RANDOLPH BESTUL	WESTERN	Lic. 2975 SKILLED CARE 115 Beds	GRACE LUTHERAN FOUNDATION INC VOLUNTARY NONPROFIT CHURCH 525505 Title 18 SNF Title 19 NF
CLAIREMONT NURSING AND REHABILITATION (THE)  2120 HEIGHTS DR EAU CLAIRE, WI 54701	(715) 832-1681 <b>FAX:</b> (715) 832-8367 Administrator: MARK WALKER	WESTERN	Lic. 3224 SKILLED CARE 161 Beds	CLAIREMONT HEALTH CARE CENTER, LLC LIMITED LIABILITY COMP(FOR-PROFIT) 525364 Title 18 SNF Title 19 NF
FALL CREEK VALLEY CARE CENTER 344 LINCOLN AVE FALL CREEK, WI 54742	(715) 877-2411 <b>FAX:</b> (715) 877-2651 Administrator: JOHN HALBLEIB	WESTERN	Lic. 2073 SKILLED CARE 60 Beds	COVENANT CARE LLC LIMITED LIABILITY COMP(FOR-PROFIT) 525460 Title 18 SNF Title 19 NF